

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000075025

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** CERTIFIED PROOF PRODUCTIONS, LLC

**Current Principal Place of Business:**

3910 NW 172ND TERRACE  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 171484  
HIALEAH, FL 33017

**New Mailing Address:**

**FEI Number:** 27-3156284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TOWNE, CHARLOTTE P.A.  
100 NW 70TH AVENUE, SUITE 203  
PLANTATION, FL 33317 US

**Name and Address of New Registered Agent:**

TOWNE, CHARLOTTE P.A.  
499 EAST SHERIDAN STREET, SUITE 201  
DANIA BEACH, FL 33004 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SIMON, KEVIN M  
Address: P.O. BOX 171484  
City-St-Zip: HIALEAH, FL 33017

Title: MGR  
Name: SIMON, KIMBERLY M  
Address: P.O. BOX 171484  
City-St-Zip: HIALEAH, FL 33017

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KIMBERLY M. SIMON

MGR

04/28/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date